## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

| CLAIMS AS FILED - PART I  |  |   |                   |                  |                                     |                  |        | SMALL ENTITY        |                        |         | OTHER               |                        |
|---|--|---|-------------------|------------------|-------------------------------------|------------------|--------|---------------------|------------------------|---------|---------------------|------------------------|
|   |  |   | (Column 1         | )                | (Colum                              | nn 2)            | T      | YPE 🗀               |                        | OR      | SMALL               |                        |
| TOTAL CLAIMS .  |  |   |                   |                  |                                     |                  |        | RATE                | FEE                    |         | RATE                | FEE                    |
| FOR   |  |   | NUMBER FILED      |                  | NUMBE                               | R EXTRA          |        | BASIC FEE           | 370.00                 | OR      | BASIC FEE           | 740.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | minus 20=         |                  | * 20                                |                  |        | X\$ 9=              |                        | OR      | X\$18= \            | 360,                   |
| INDEPENDENT CLAIMS  |  |   | minus 3 =         |                  | * 6                                 |                  |        | X42=                |                        | OR      | X84=                | 480,                   |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |                   |                  |                                     |                  |        | +140=               |                        | OR      | +280=               | ·                      |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |                   |                  |                                     |                  |        | TOTAL               |                        | OR      | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II   |  |   |                   |                  |                                     |                  |        |                     |                        |         | OTHER THAN          |                        |
|   | (Column 1) (Column 2) (Column 3)               |   |                   |                  |                                     |                  |        | SMALL               | ENTITY                 | OR .    | SMALL               | ENTITY                 |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                   | NUN<br>PREV      | HEST<br>MBER<br>IOUSLY<br>D FOR     | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | * 30  | Minus             | ** ~             | 0,                                  | 1                |        | X\$ 9=              |                        | OR      | X\$18=              |                        |
|   | Independent                                    | * 9   | Minus             | ***              | T LAMA                              |                  |        | X42=                |                        | OR      | X84=                |                        |
|   | FIRST PRESEN                                   | NIALION OF M                                | OLTIPLE DEP       | ENDEN            | IT CLAIM                            |                  | ,      | +140=               |                        | OR      | +280=               |                        |
|   |  | ·   |                   |                  |                                     |                  |        | TOTAL<br>ADDIT. FEE |                        | OR      | TOTAL<br>ADDIT. FEE |                        |
| 2   | 8-20-04 (Column 1) RCE (Column 2) (Column 3)   |   |                   |                  |                                     |                  |        |                     |                        |         | -                   | -                      |
| ┟┌  | - 20 -0 1                                      |   |                   |                  | HEST                                | (Coldinit 5)     | i f    |                     | ADDI-                  | 1       | ,                   | ADDI-                  |
| AMENDMENT B   |  | REMAINING<br>AFTER<br>AMENDMENT             |                   | PREV             | MBER<br>/IOUSLY<br>D FOR            | PRESENT<br>EXTRA |        | RATE                | TIONAL<br>FEE          |         | RATE                | TIONAL<br>FEE          |
|   | Total  | *  ]  | Minus             | ** *             | 40                                  | =                |        | X\$ 9=              |                        | OR      | X\$18=              |                        |
|   | Independent                                    | * 2   | Minus             | ***              | 9                                   | =                | 1      | X42=                |                        | OR      | X84=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                   |                  |                                     |                  |        |                     |                        | 1       |                     |                        |
|   |  |   |                   |                  |                                     |                  |        | +140=               |                        | OR      | +280=               |                        |
|   |  |   |                   |                  |                                     |                  | •      | TOTAL<br>ADDIT. FEE |                        | OR      | TOTAL<br>ADDIT, FEE |                        |
|   |  | (Column 1)                                  |                   | (Col             | umn 2)                              | (Column 3)       |        | ADDII. I LL         |                        | _       |                     |                        |
| AMENDMENT C   |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                   | HIC<br>NU<br>PRE | GHEST<br>IMBER<br>VIOUSLY<br>ID FOR | PRESENT<br>EXTRA | ו      | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
| DME   | Total  | *   | Minus             | **               |                                     | =                | 11     | X\$ 9=              |                        | OR      | X\$18=              |                        |
| ME  | Independent                                    | *   | Minus             | ***              |                                     | =                |        | X42=                |                        | OR      | X84=                |                        |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                   |                  |                                     |                  |        | +140=               |                        | 1       | +280=               |                        |
|   | If the entry in colu                           | ımn 1 is less than                          | the entry in colu | ımn 2. w         | rite "O" in co                      | olumn 3.         |        | TOTAL               |                        | OR      | TOTA                |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |   |                   |                  |                                     |                  |        |                     |                        | OR      | ADDIT. FEI          |                        |
|   | The "Highest Nur                               | mber Previously P                           | aid For" (Total o | r Indepe         | ndent) is the                       | e highest numi   | ber fo | und in the ap       | propriate b            | ox in c | olumn 1.            | •                      |